## **LEGISLATIVE FACT SHEET**

DATE:	05/24/17	BT or RC No: 13 T 17-11 5 (Administration & City Council Bills)
		(Administration & City Council Bills)
SPONSOR:		ering and Construction Management (Department/Division/Agency/Council Member)
Contact for all inc	quiries and presentation	NE CONTRACTOR OF THE PROPERTY
Provide Name: Tom Fallin		
Contac	t Number:	255 - 8710
Email A	ddress:	thomasf@coj.net
Research will complete (Minimum of 350 Magnolia Street is a are located inside Cl during a biannual ins was not part of previ renewing the pile en- 7' or so feet below p edge planks on both repair of this bridge to budget and CIP review	this form for Council introduced words - Maximum of 1 pa low-traffic roadway that serve ay County to the south. The spection, issued a Prompt Coous repair requests. A previous where they contact the beavement elevation and new paides will be removed and reto keep it in service is of vital	bes a dead end access to 12 plus residential properties, several of which bridge is a timber bridge that was rebuilt in 1982. In February the FDOT, prective Action to repair/replace failing timber endwalls at both ends that bous task of repairs was performed back in 2015 for the purposes of ant caps. The existing bridge 4x8 endwall planks will be removed down to blanking, filter fabric, backfilling, and paving will be installed. Also, the 2' eplaced. Being the sole route for the 12 plus properties to the south, importance. Deferral of this amendment of the CIP until the next annual best interest of the community because such deferral will result in the

APPROPRIATION: Total A	mount Appropriated	\$177,601.00	as follows:	
List the source <u>name</u> and pr	ovide Object and Subol	bject Numbers for eac	ch category list	ed below:
(Name of Fund as it will appear in t	itle of legislation)			
Name of Federal Funding Source(	From:		Amount:	
	То:		Amount:	
Name of State Funding Source(s)	From:	3000	Amount:	
	To:		Amount:	
Name of City of Jacksonville	Local Option Gas Ta	ax, & 2009 AUTHORIZED	Amount:	\$177,601.00
Funding Source(s):	Local Option Gas Ta To: CAPITAL PRJECTS	ax, & 2009 AUTHORIZED	Amount:	\$177,601.00
Name of In-Kind Contribution(s):	From:		Amount:	
()	То:		Amount:	d data
Name & Number of Bond	From:		Amount:	
Account(s):	To:		Amount:	

## PLAIN LANGUAGE OF APPROPRIATION / FINANCIAL IMPACT / OTHER:

Explain: Where are the funds coming from, going to, how will the funds be used? Does the funding require a match? Is the funding for a specific time frame? Will there be an ongoing maintenance? ... and staffing obligation? Per Chapters 122 & 106 regarding funding of anticipated post-construction operation costs.

(Minimum of 350 words - Maximum of 1 page.)

(Minimum of 330 Words - Maximum of 1 page.)	
	rized Local Options Gas Tax and 2009 Authorized Capital Projects proceeds.
i his or pay-go dollars which will obviate the	City from incurring any debt to complete this project.
ACTION ITEMS: Purpose / Check L code provisions for each.	ist. If "Yes" please provide detail by attaching justification, and
ACTION ITEMS: Yes No	
AND THE RESIDENCE OF THE PARTY	Justification of Emergency: If yes, explanation must include detailed nature of
Emergency? X	emergency.
	1
Fordered on Chate	
Federal or State	Explanation: If yes, explanation must include detailed nature of mandate
Mandate? ^	including Statute or Provision.
·—— ·——	

Fiscal Year Carryover?	Note: If yes, note must include explanation of all-year subfund carryover language.
,	Subfunds 143 & 327 are all-years subfunds
CIP Amendment? X	Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.
Contract / Agreement Approval?	Attachment & Explanation: If yes, attach the Contract / Agreement and name of Department (and contact name) that will provide oversight. Indicate if negotiations are on-going and with whom. Has OGC reviewed / drafted?
Related RC/BT? X	Attachment: If yes, attach appropriate RC/BT form(s).
Waiver of Code? X	Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper.
Code Exception? X	Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.
Related Enacted X Ordinances?	Code Reference: If yes, identify related code section(s) and ordinance reference number in the box below and provide detailed explanation and any changes necessary within white paper.
	2014 - 733
ACTION ITEMS CONTINUED: Pur justification, and code provisions fo	rpose / Check List. If "Yes" please provide detail by attaching reach.
ACTION ITEMS: Yes No	
Continuation of Grant?	Explanation: How will the funds be used? Does the funding require a match? Is the funding for a specific time frame and/or multi-year? If multi-year, note year of grant? Are there long-term implications for the General Fund?
Surplus Property Certification?	Attachment: If yes, attach appropriate form(s).

Reporti Requirement	-	and frequency of reports, including	ng City Council / Auditor) to receive reports when reports are due. Provide Department ne number) responsible for generating
Division Chief:_	William	(signature)	Date: 5/25 /2017
Prepared By: _	Musto f	(signature)	Date: 5/25/2017

## **ADMINISTRATIVE TRANSMITTAL**

MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325		
John P. Pappas, P.E., Director of Public Works (Name, Job Title, Department)		
Phone: 255 - 8707 E-mail: <u>pappas@coj.net</u>		
Thomas Fallin, P.E., Chief of Engineering and Construction Management Div.  Initiating Department Representative (Name, Job Title, Department)		
Phone: 255 - 8710 E-mail: <u>thomasf@coj.net</u>		
Thomas Fallin, P.E., Chief of Engineering and Construction Management Div.  (Name, Job Title, Department)  Phone: 255 - 8710 E-mail: <a href="mailto:thomasf@coj.net">thomasf@coj.net</a>		
Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor 904-630-1825 E-mail: akshelton@coj.net		
CIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL		
Peggy Sidman, Office of General Counsel, St. James Suite 480 Phone: 904-630-4647 E-mail: psidman@coj.net		
Initiating Council Member / Independent Agency / Constitutional Officer		
Phone: E-mail:		
(Name, Job Title, Department)		
Phone: E-mail: Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor		
904-630-1825 E-mail: akshelton@coj.net		
on from Independent Agencies requires a resolution from the Independent Agency Board ag the legislation.  dent Agency Action Item:  Yes  No  Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?		

## FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED

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